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|---|----------------------|-----------------------------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application No. | 10/616,093 |
| | Filing Date | July 8, 2003 |
| | First Named Inventor | Steven Verhaverbeke |
| | Art Unit | 1746 |
| | Examiner Name | Markoff, Alexander |
| Total Number of Pages in This Submission | 21 | Attorney Docket Number: 4887P446D |

| ENCLOSURES (check all that apply) | | |
|--|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Petition | <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition to Convert a Provisional Application | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Terminal Disclaimer | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Request for Refund | <div>*Request for Continued Examination (RCE) + copy *Return Postcard</div> |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> CD, Number of CD(s) | |
| <input type="checkbox"/> PTO/SB/08 | <input type="checkbox"/> Landscape Table on CD | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | | |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | Remarks | |
| <input type="checkbox"/> Basic Filing Fee | | |
| <input type="checkbox"/> Declaration/POA | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Neal Berezny, Reg. No. 56,030 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature | <i>Neal Berezny</i> |
| Date | 1-22-07 |

| CERTIFICATE OF MAILING/TRANSMISSION | | | |
|--|-------------------------|------|------------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | | |
| Typed or printed name | Carrie Boccacini | | |
| Signature | <i>Carrie Boccacini</i> | Date | January 22, 2007 |



FEE TRANSMITTAL for FY 2006

Patent fees are subject to annual revision.

Complete if Known

Application Number 10/616,093
Filing Date July 8, 2003
First Named Inventor Steven Verhaverbeke
Examiner Name Markoff, Alexander
Art Unit 1746
Attorney Docket No. 4887P446D

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 910.00

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|-----------------|----------|
| 20 | 20 | 0 | \$0.00 |
| 3 | 3 | 200.00 | \$0.00 |
| Multiple Dependent | | | |
| Large Entity | Small Entity | Fee Description | |
| Fee Code | Fee (\$) | Fee Code | Fee (\$) |
| 1202 | 50 | 2202 | 25 |
| 1201 | 200 | 2201 | 100 |
| 1203 | 360 | 2203 | 180 |
| 1204 | 790 | 2204 | 395 |
| 1205 | 300 | 2205 | 150 |
| SUBTOTAL (1) | | (\$) | |
| | | 0.00 | |

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

| Large Entity | | Small Entity | | Fee Description | Fee Paid |
|---------------------|----------|---|----------|--|----------|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | | |
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. | |
| 2053 | 130 | 2053 | 130 | Non-English specification | |
| 1251 | 120 | 2251 | 60 | Extension for reply within first month | 120.00 |
| 1252 | 450 | 2252 | 225 | Extension for reply within second month | |
| 1253 | 1,020 | 2253 | 510 | Extension for reply within third month | |
| 1254 | 1,590 | 2254 | 795 | Extension for reply within fourth month | |
| 1255 | 2,160 | 2255 | 1,080 | Extension for reply within fifth month | |
| 1401 | 500 | 2401 | 250 | Notice of Appeal | |
| 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | |
| 1403 | 1,000 | 2403 | 500 | Request for oral hearing | |
| 1451 | 1,510 | 2451 | 1,510 | Petition to institute a public use proceeding | |
| 1460 | 130 | 2460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 1809 | 790 | 1809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| Other fee (specify) | | Request for Continued Examination (RCE) | | | 790.00 |
| SUBTOTAL (2) | | (\$) | | 910.00 | |

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Neal Bereznay Registration No. 56,030 Telephone (408) 720-8300
Signature Neal Bereznay Date 1-22-07